									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECOI									- t				
Effective October 1, 2003								110 717,032					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN		
TOTAL CLAIMS 12								RATE	FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		В	BASIC FEE 385.00		OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			2 minus 20=		* 18			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			3 m	nus 3 =	Ø		Γ	X43=		OR	X86=		
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL 385		OR	. TOTAL		
CLAIMS AS AMENDED - PART II								OTHER THAN					
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUME PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.3	Minus	-2	0	= -		X\$ 9=		OR	X\$18=	1	
	Independent	.3	Minus ***		3_	= -		X43=	1	OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	1/	OR	+390=		
1,3,11							L	TOTAL			TOTAL		
(Column 1) (Column 2) (Column 3)								DIT. FEE	/		AÓDIT. FEEÌ		
	•	CLAIMS		HIGH	EST .				ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID (USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**	•	= .	;	X\$ 9=		OR	X\$18=		
	Independent	+	Minus	***	<u>.</u>	=		X43=		OR	X86=		
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	ENDENT	CLAIN		٠	145=		OR	+290=		
•								TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE		
		70		 .									
	`	(Column 1) CLAIMS		(Colum	ST	(Column 3)		_	ADDI-			ADDI-	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA	F	RATE	TIONAL FEE		RATE	TIONAL FEE	
DME	Total .	*	Minus	Anh ·		-	T	(\$ '9=		OR	X\$18=		
ME	Independent	*	Minus	***		=	\	X43=			X86=		
۷	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	-		
+145=										OR	+290=		
** }	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR	TOTAL ADDIT, FEE		
****	f the "Highest Nu The "Highest Num	mber Previously Paid ber Previously Paid	id For" IN THI For" (Total or	S SPACE is Independe	tess thant) is the	n 3, enter "3." highest number			propriate box				